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## FACSIMILE COVER SHEET

**TO:** U.S. Patent & Trademark Office  
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**FROM:** Michael K. O'Neill (Reg. No.: 32,622)

**RE:** U.S. Application No. 10/646,887  
Attn: Examiner William H. Mayo III  
Group Art Unit 2831  
Atty. Docket No. 03500.017495.

**FAX NO.:** (703) 872-9306

**DATE:** March 21, 2005 (Monday) **NO. OF PAGES:** 20  
(including cover page)

**TIME:** 5:46 pm **SENT BY:** Dawn Mangino


## MESSAGE

Transmitted herewith is an Amendment and an Amendment Transmittal in response to the Office Action dated December 10, 2004, and an Information Disclosure Statement.

I hereby certify that this correspondence is being facsimile transmitted to: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450 on

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(Name of Attorney for Applicant)

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Signature Date of Signature

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In re Application of:

Docket No. 03500.017495

SHINICHI NISHIMURA

Application No.: 10/646,887

Examiner: William H. Mayo III

Filed: August 25, 2003

Group Art Unit: 2831

For: SHIELDED CABLE

Date: March 21, 2005 (Monday)

Mail Stop Amendment  
 Commissioner for Patents  
 P.O. Box 1450  
 Alexandria, VA 22313-1450

Sir:

Transmitted herewith is an Amendment in the above-identified application.

☒ No additional fee is required.

The fee has been calculated as shown below

CLAIMS AS AMENDED						
	(2) CLAIMS REMAINING AFTER AMENDMENT		(4) HIGHEST NO. PREVIOUSLY PAID FOR	(5) PRESENT EXTRA	RATE	ADDITIONAL FEE
TOTAL CLAIMS	* 8	MINUS	** 20	= 0	x \$25 \$50	0
INDEP. CLAIMS	* 1	MINUS	*** 3	= 0	x \$100 \$200	0
Fee for Multiple Dependent claims \$180°/\$360						
TOTAL ADDITIONAL FEE FOR THIS AMENDMENT---						0

\* If the entry in Column 2 is less than the entry in Column 4, write "0" in Column 5.

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Michael K. O'Neill (Reg. No. 32,622)  
 (Name of Attorney for Applicant)

*Michael K. O'Neill*  
 Signature

March 21, 2005  
 Date of Signature

- ☐ Verified Statement claiming small entity status is enclosed, if not filed previously.
- ☐ A check in the amount of \$\_\_\_\_\_ is enclosed.
- ☐ Charge \$\_\_\_\_\_ to Deposit Account No. 06-1205. A duplicate copy of this sheet is enclosed.
- ☒ Any prior general authorization to charge an issue fee under 37 C.F.R. 1.18 to Deposit Account No. 06-1205 is hereby revoked. The Commissioner is hereby authorized to charge any additional fees under 37 C.F.R. 1.16 and 1.17 which may be required during the entire pendency of this application, or to credit any overpayment, to Deposit Account No. 06-1205. A duplicate copy of this paper is enclosed.
- ☐ A check in the amount of \$\_\_\_\_\_ to cover the fee for a \_\_\_\_\_ month extension is enclosed.
- ☐ A check in the amount of \$\_\_\_\_\_ to cover the Information Disclosure Statement fee is enclosed.
- ☒ Applicant's undersigned attorney may be reached in our Costa Mesa, California office by telephone at (714) 540-8700. All correspondence should continue to be directed to our address given below.

Respectfully submitted,



Michael K. O'Neill  
Attorney for Applicant  
Registration No.: 32,622

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